

UTILITY PATENT APPLICATION TRANSMITTAL <small>(Only for new nonprovisional applications under 37 CFR 1.53(b))</small>		Attorney Docket No. 242623US6	
		First Inventor or Application Identifier Alain J. M. BASSOT, et al.	
		Title CONTROLLING THE AXIAL POSITION OF A FAN BLADE	

APPLICATION ELEMENTS <small>See MPEP chapter 600 concerning utility patent application contents</small>	ADDRESS TO: Commissioner for Patents Mail Stop Patent Application Alexandria, Virginia 22313
<div>1. <input checked="" type="checkbox"/> Fee Transmittal Form (e.g. PTO/SB/17) <small>(Submit an original and a duplicate for fee processing)</small></div> <div>2. <input checked="" type="checkbox"/> Specification Total Sheets 7</div> <div>3. <input checked="" type="checkbox"/> Drawing(s) (35 U.S.C. 113) Total Sheets 2</div> <div>4. <input type="checkbox"/> Oath or Declaration Total Pages <div style="margin-left: 20px;"><div>a. <input type="checkbox"/> Newly executed (original or copy)</div><div>b. <input type="checkbox"/> Copy from a prior application (37 C.F.R. §1.63(d)) <small>(for continuation/divisional with box 17 completed)</small><div style="margin-left: 20px;">i. <input type="checkbox"/> DELETION OF INVENTOR(S) <small>Signed statement attached deleting inventor(s) named in the prior application, see 37 C.F.R. §1.63(d)(2) and 1.33(b).</small></div></div></div><div>5. <input type="checkbox"/> CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix)</div><div>6. <input type="checkbox"/> Nucleotide and/or Amino Acid Sequence Submission <small>(if applicable, all necessary)</small><div style="margin-left: 20px;"><div>a. <input type="checkbox"/> Computer Readable Form (CRF)</div><div>b. Specification or Sequence Listing on :<div style="margin-left: 20px;"><div>i. <input type="checkbox"/> CD-ROM or CD-R (2 copies); or</div><div>ii. <input type="checkbox"/> Paper</div></div></div><div>c. <input type="checkbox"/> Statements verifying identity of above copies</div></div></div></div>	ACCOMPANYING APPLICATION PARTS <div>7. <input type="checkbox"/> Assignment Papers (cover sheet & document(s))</div> <div>8. <input checked="" type="checkbox"/> Application Data Sheet. See 37 CFR 1.76</div> <div>9. <input type="checkbox"/> 37 C.F.R. §3.73(b) Statement <input type="checkbox"/> Power of Attorney <small>(when there is an assignee)</small></div> <div>10. <input type="checkbox"/> English Translation Document <small>(if applicable)</small></div> <div>11. <input checked="" type="checkbox"/> Information Disclosure Statement (IDS)/PTO-1449 <input checked="" type="checkbox"/> Copies of IDS Citations (2)</div> <div>12. <input type="checkbox"/> Preliminary Amendment</div> <div>13. <input checked="" type="checkbox"/> White Advance Serial No. Postcard</div> <div>14. <input type="checkbox"/> Certified Copy of Priority Document(s) <small>(if foreign priority is claimed)</small></div> <div>15. <input type="checkbox"/> Applicant claims small entity status. <small>See 37 CFR 1.27</small></div> <div>16. <input checked="" type="checkbox"/> Other: French Search Report with Translation of Categories</div>

17. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below:

☐ Continuation ☐ Divisional ☐ Continuation-in-part (CIP)

of prior application no.:

Prior application information:

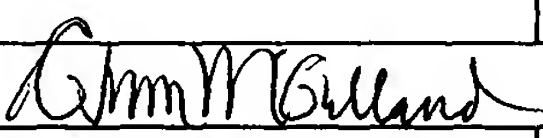
Examiner:

Group Art Unit:

For CONTINUATION OR DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 4b, is considered a part of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

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22278 U.S. PTO
10/659290
09/11/03

Docket No. 242623US6

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

INVENTOR(S) Alain J. M. BASSOT, et al.

SERIAL NO: New Application

FILING DATE: Herewith

FOR: CONTROLLING THE AXIAL POSITION OF A FAN BLADE

FEE TRANSMITTAL

COMMISSIONER FOR PATENTS
ALEXANDRIA, VIRGINIA 22313


FOR	NUMBER FILED	NUMBER EXTRA	RATE	CALCULATIONS
TOTAL CLAIMS	4 - 20 =	0	x \$18 =	\$0.00
INDEPENDENT CLAIMS	1 - 3 =	0	x \$84 =	\$0.00
<input type="checkbox"/> MULTIPLE DEPENDENT CLAIMS (If applicable)			+ \$280 =	\$0.00
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TOTAL OF ABOVE CALCULATIONS				\$880.00
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- ☐ Please charge Deposit Account No. 15-0030 in the amount of _____ A duplicate copy of this sheet is enclosed.
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Respectfully Submitted,

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